

IN THE UNITED STATES PATENT AND TRADEMARK OFFICE

18C3
18C1
11/13/95

0280

APPLICANT : GREENE, ET AL.
SERIAL NO. : 08/469,637
FILED : June 6, 1995
FOR : HUMAN TUMOR NECROSIS FACTOR RECEPTOR
ART UNIT : Unassigned
EXAMINER : Unassigned

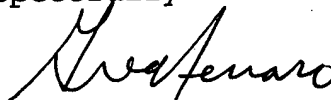
Assistant Commissioner of Patents
Washington, D.C. 20231

Dear Sir:

Enclosed please find the following:

1. Copy of Notice to File Missing Parts;
2. Preliminary Amendment;
3. Diskette and Hard Copy of Sequence Listing; and
4. Date Stamped Receipt Card.

Respectfully submitted,



Gregory D. Ferraro
Registration No. 36,134
Carella, Byrne, Bain, Gilfillan,
Cecchi, Stewart & Olstein
6 Becker Farm Road
Roseland, New Jersey 07068
(201) 994-1700

I hereby certify this correspondence is being
deposited with the United States Postal Service as
first class mail in an envelope addressed to Commis-
sioner of Patents and Trademarks, Washington, D.C.
20231, on 8/21/95....
(Date of Deposit)

Greg. Ferraro....

of applicant, Assignee, or
Representative

Greg. Ferraro....

8/21/95....



UNITED STATES DEPARTMENT OF COMMERCE
Patent and Trademark Office
Address: COMMISSIONER OF PATENTS AND TRADEMARKS
Washington, D.C. 20231

APPLICATION NUMBER	FILING DATE	FIRST NAMED APPLICANT	ATTY. DOCKET NO./TITLE
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08/409,637 06/06/95 GREENE

0282/0719

GREGORY D. FERRARO
CARRELLA BYRNE BOIN GILFILLAN CECCHI
STEWART AND OLSTEIN
4 BECKER FARM ROAD
ROSELAND, NJ 07068

DATE MAILED: 1995

**NOTICE TO FILE MISSING PARTS OF APPLICATION
FILING DATE GRANTED**

07-10/95

An Application Number and Filing Date have been assigned to this application. However, the items indicated below are missing. The required items and fees identified below must be timely submitted **ALONG WITH THE PAYMENT OF A SURCHARGE** for items 1 and 3-6 only of \$_____ for large entities or \$_____ for small entities who have filed a verified statement claiming such status. The surcharge is set forth in 37 CFR 1.16(e).

If all required items on this form are filed within the period set below, the total amount owed by applicant as a ☐ large entity, ☐ small entity (verified statement filed), is \$_____.

Applicant is given **ONE MONTH FROM THE DATE OF THIS LETTER, OR TWO MONTHS FROM THE FILING DATE** of this application, **WHICHEVER IS LATER**, within which to file all required items and pay any fees required above to avoid abandonment. Extensions of time may be obtained by filing a petition accompanied by the extension fee under the provisions of 37 CFR 1.136(a).

1. ☐ The statutory basic filing fee is: ☐ missing ☐ insufficient. Applicant as a ☐ large entity ☐ small entity, must submit \$_____ to complete the basic filing fee.
2. ☐ Additional claim fees of \$_____ as a ☐ large entity, ☐ small entity, including any required multiple dependent claim fee, are required. Applicant must submit the additional claim fees or cancel the additional claims for which fees are due.
3. ☐ The oath or declaration:
☐ is missing.
☐ does not cover the newly submitted items.

An oath or declaration in compliance with 37 CFR 1.63, identifying the application by the above Application Number and Filing Date is required.

4. ☐ The oath or declaration does not identify the application to which it applies. An oath or declaration in compliance with 37 CFR 1.63, identifying the application by the above Application Number and Filing Date, is required.
5. ☐ The signature(s) to the oath or declaration is/are: ☐ missing; ☐ by a person other than the inventor or a person qualified under 37 CFR 1.42, 1.43, or 1.47. A properly signed oath or declaration in compliance with 37 CFR 1.63, identifying the application by the above Application Number and Filing Date, is required.
6. ☐ The signature of the following joint inventor(s) is missing from the oath or declaration:
_____. An oath or declaration listing the names of all inventors and signed by the omitted inventor(s), identifying this application by the above Application Number and Filing Date, is required.
7. ☐ The application was filed in a language other than English. Applicant must file a verified English translation of the application and a fee of \$_____ under 37 CFR 1.17(k), unless this fee has already been paid.
8. ☐ A \$_____ processing fee is required since your check was returned without payment. (37 CFR 1.21(m)).
9. ☐ Your filing receipt was mailed in error because your check was returned without payment.
10. ☒ The application does not comply with the Sequence Rules. See attached Notice to Comply with Sequence Rules 37 CFR 1.821-1.825.
11. ☐ Other.

Direct the response to Box Missing Part and refer any questions to the Customer Service Center at (703) 308-1202.

A copy of this notice MUST be returned with the response.

FORM 1553 (REV. 11-94)

KEY'S APPLICANTS COPY